

PART B—ISSUE FEE TRANSMITTAL

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Kristine A. Wacek (Depositor's name)

Kristine A. Wacek (Signature)

February 1, 1999 (Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
10/20/98	02/04/99	100	LAUW, S	02/04/1999

First Named
Applicant

ROBERT MCGOWAN, JR. (inventor) C. Davis

TITLE OF
INVENTION

IMPROVED APPARATUS FOR REFLECTING HIGH INTENSITY PLASMA GAS DISCHARGE

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ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
3-22065-1	3773-140	110	11111111	YES	1600.00	02/04/99

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Merchant, Gould,

2 Smith, Edell, Welter

3 & Schmidt, P.A.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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Please check the appropriate assignee category indicated below (will not be printed on the patent)

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The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)
1 FEBRUARY
1999

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